



Glenn Grieb
Plant Manager
VEOLIA WATER NORTH AMERICA

KinBuc Landfill Treatment Plant
383 Meadow Road
Edison, NJ 08817
www.veoliawatema.com

March 21st, 2005

Ms. Grissel V. Diaz-Cotto
Emergency and Remedial Response Division
United States Environmental Protection Agency
Region II
290 Broadway, 19th Floor
New York, NY 10007-1866

Re: February 2005 Discharge Monitoring Report
Leachate Treatment Plant, Operable Unit 1
Kin-Buc Landfill Superfund Site

Dear Ms. Diaz-Cotto:

The February 2005 Discharge Monitoring Report (DMR) for the Leachate Treatment Plant of Operable Unit 1, Kin-Buc Landfill Superfund Site, prepared by Veolia Water Operating Services is attached. Should you have any questions concerning the DMR or other site items, please contact me at your earliest convenience at the Kin-Buc site.

Very truly yours,
Veolia Water Operating Services
On behalf of SCA Services, Inc.,

Glenn Grieb
Plant Manager

Enclosure

cc: Martha Goodwin – NJDEP
Stephen Joyce – SCA Holding
Carl Januszkiewicz – Waste Management
Richard Hoyt – Veolia Water OS



562168



NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDDES NO.
* NJ Permit Equivalent

REPORTING PERIOD
M o. Y r. M o. Y r.
0 2 0 5 0 2 0 5

PERMITTEE: Name: SCA Services, Inc.
 Address: 383 Meadow Road
 Edison, New Jersey 08817

FACILITY: Name: Kin-Buc Landfill
 Address: 383 Meadow Road
 Edison, New Jersey 08817
 Telephone: 732-572-4743

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

SLUDGE REPORT-SANITARY

 T-VWX-007 T-VWX-008 T-VWX-009
 EPA Form 3320-1

DYE TESTING YES NO
 X

SLUDGE REPORT-INDUSTRIAL

 T-VWX-010A T-VWX-010B

TEMPORARY BYPASSING X

DISINFECTION INTERRUPTION X

WASTEWATER REPORTS

 T-VWX-011 T-VWX-012 T-VWX-013

MONITORING MALFUNCTIONS X

UNITS OF OPERATION X

GROUNDWATER REPORTS

 T-VWX-015(A,B) T-VWX-016 T-VWX-017
 ELECTRONIC SUBMISSION

OTHER X

NPDES DISCHARGE MONITORING

 1 EPA Form 3320-1

(Detail any "Yes" on reverse side in appropriate space.)

NOTE: The "Hours Attended at Plant" on the reverse of this sheet must also be completed.

AUTHENTICATION I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

LICENSED OPERATOR

PRINCIPAL EXECUTIVE OFFICER OR
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Glenn Grieb
Grade & Registry No. N-4 ; 0021212
Signature *Glenn Grieb*

Name (Printed) Glenn Grieb
Title (Printed) Plant Operations Manager
Signature *Glenn Grieb*

Date **March 12th, 2005**

[illegible]

HOURS ATTENDED AT PLANT MONTH **02** YEAR **05**

Day of Month

Licensed Operator

Others

Day of Month

Licensed Operator

Others

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
0	8	8	8	3	0	13	12	0	0	8	0	0	8	8	8
8	10	8	8	12	4	8	8	8	8	8	12	4	12	12	8
17	18	19	20	21	22	23	24	25	26	27	28				
0	8	8	8	8	8	8	8	0	4	0	12				
8	8	12	4	12	12	8	8	8	4	4	4				

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

FACILITY

LOCATION

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT**

NJ PERMIT EQUIVALENT

PERMIT NUMBER

001

DISCHARGE NUMBER

MONITORING PERIOD

YEAR MO DAY

05 02 01

YEAR MO DAY

05 02 28

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.023262	0.039322	MGD	*****	*****	*****	***	***	continuous	flow meter
	PERMIT REQUIREMENT	REPORT	ONLY		*****	*****	*****			continuous	flow meter
pH	SAMPLE MEASUREMENT	*****	*****	***	6.72	*****	7.28	S.U.	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		6.0	*****	9.0			weekly	grab
PETROLEUM HYDROCARBONS	SAMPLE MEASUREMENT	*****	*****	***	*****	<1.000	<1.000	mg/l	0	2/month	grab
	PERMIT REQUIREMENT	*****	*****		*****	10	15			2/month	grab
COD	SAMPLE MEASUREMENT	6.5	12.9	kg/day	*****	151	170	mg/l	0	2/month	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT	ONLY			2/month	comp.
BOD	SAMPLE MEASUREMENT	*****	*****	***	*****	<5.00	<5.00	mg/l	0	2/month	comp.
	PERMIT REQUIREMENT	*****	*****		*****	56	220			2/month	comp.
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT	0.37	0.46	kg/day	*****	2.94	3.80	mg/l	0	1/week	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	30	45(1)			weekly	comp.
DISSOLVED OXYGEN	SAMPLE MEASUREMENT	*****	*****	***	9.58	*****	*****	mg/l	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		4.0 MIN Instantaneous	*****	*****			weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE		
Glenn Grieb Project Manager							732 572-4743		05 03 12		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR MO DAY		
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)									

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

FACILITY

LOCATION

ATTN:

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM

DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT

PERMIT NUMBER

001

DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY
05	02	01

YEAR	MO	DAY
05	02	28

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			YEAR	MO	DAY
BENZENE	SAMPLE MEASUREMENT	0.000036	<0.0000442	kg/day	*****	<.30	<.30	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.009	0.02		*****	57	134			2/month	grab		
CHLOROBENZENE	SAMPLE MEASUREMENT	<0.000036	<0.0000442	kg/day	*****	<0.30	<0.30	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380			2/month	grab		
1,1 DICHLOROETHENE	SAMPLE MEASUREMENT	<0.0000484	<0.0000590	kg/day	*****	<0.40	<0.40	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.003	0.009		*****	22	59			2/month	grab		
ETHYLBENZENE	SAMPLE MEASUREMENT	<0.0000363	<0.0000442	kg/day	*****	<0.30	<0.30	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380			2/month	grab		
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000379	<0.0000590	kg/day	*****	<0.40	<0.40	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.008	0.025		*****	52	164			2/month	grab		
TOLUENE	SAMPLE MEASUREMENT	0.0000363	0.0000442	kg/day	*****	<0.30	<0.30	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.004	0.011		*****	28	74			2/month	grab		
1,2-TRANSDICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000363	<0.0000442	kg/day	*****	<0.30	<0.30	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.004	0.009		*****	25	80			2/month	grab		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE			DATE			
Glenn Grieb Project Manager							732 572-4743			05 03 12			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA COD NUMBER			YEAR MO DAY			

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

FACILITY

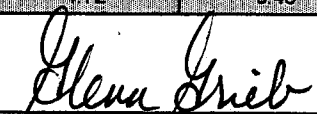
LOCATION

ATTN:

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
05	02	01		05	02	28

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TRICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000484	<0.0000590	kg/day	*****	<0.40	<0.40	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.010		*****	26	69			2/month	grab
VINYL CHLORIDE	SAMPLE MEASUREMENT	<0.0000463	<0.0000590	kg/day	*****	<0.40	<0.40	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.008	0.016		*****	52.8	106			weekly	grab
ACENAPHTHYLENE	SAMPLE MEASUREMENT	<0.0000086	<0.0000105	kg/day	*****	<0.071	<0.071	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(A)ANTHRACENE	SAMPLE MEASUREMENT	<0.0001107	<0.0001342	kg/day	*****	<0.92	<0.92	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(A)PYRENE	SAMPLE MEASUREMENT	<0.0000086	<0.0000105	kg/day	*****	<0.071	<0.071	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(ghi)PERYLENE	SAMPLE MEASUREMENT	<0.0000086	<0.0000105	kg/day	*****	<0.071	<0.071	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(k)FLUORANTHENE	SAMPLE MEASUREMENT	<0.000074	<0.000090	kg/day	*****	<0.06	<0.06	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)				 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Glenn Grieb Project Manager								732 572-4743		05 03 12	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS

(REFERENCE ALL ATTACHMENTS HERE)

<0.00017

PERMITTEE NAME/ADDRESS

NAME SCA SERVICES, INC.
ADDRESS 383 MEADOW ROAD
EDISON, NEW JERSEY 08817

FACILITY KIN-BUC LANDFILL
LOCATION EDISON, NEW JERSEY
ATTN: CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT
PERMIT NUMBER

001
DISCHARGE NUMBER

MONITORING PERIOD
YEAR MO DAY TO YEAR MO DAY
05 02 0 TO 05 02 28

PARAMETER		QUANTITY OR LOAD			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IDENO(1,2,3cd) PYRENE	SAMPLE MEASUREMENT	<0.0000111	<0.0000134	kg/day	*****	<0.092	<0.092	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
PHENANTHRENE	SAMPLE MEASUREMENT	<0.0000116	<0.0000147	kg/day	*****	<0.10	<0.10	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	5.4(2)			weekly	grab
ALDRIN	SAMPLE MEASUREMENT	<0.0000032	<0.0000049	kg/day	*****	<0.025	<0.040	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.000133	0.00026		*****	0.0875	0.176			monthly	grab
4,4-DDT	SAMPLE MEASUREMENT	<0.0000012	<0.0000015	kg/day	*****	<0.01	<0.01	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.0000578	0.000146		*****	0.38	0.785			weekly	grab
PCB-1242	SAMPLE MEASUREMENT	<0.0000231	<0.0000295	kg/day	*****	<0.20	<0.20	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
PCB-1248	SAMPLE MEASUREMENT	<0.0000347	<0.0000442	kg/day	*****	<0.30	<0.30	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
PCB-1254	SAMPLE MEASUREMENT	<0.0000231	<0.0000295	kg/day	*****	<0.20	<0.20	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE		
Glenn Grieb Project Manager							732 572-4743		05 02 12		
TYPED OR PRINTED							AREA CODE NUMBER		YEAR MO DAY		

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS

(REFERENCE ALL ATTACHMENTS HERE)

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

FACILITY

LOCATION

ATTN:

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
 DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT

PERMIT NUMBER

001

DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY
05	02	01

TO

YEAR	MO	DAY
05	02	28

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PCB-1260	SAMPLE MEASUREMENT	<0.0000347	<0.0000442	kg/day	*****	<0.30	<0.30	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
ARSENIC	SAMPLE MEASUREMENT	0.0004796	0.0006707	kg/day	*****	4.20	5.50	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.013	0.028		*****	85.8	172			weekly	comp
CADMIUM	SAMPLE MEASUREMENT	<0.0000524	<0.0000732	kg/day	*****	0.5	0.6	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.0073	0.017		*****	48.2	112			weekly	comp
CHROMIUM	SAMPLE MEASUREMENT	0.0002597	0.0004129	kg/day	*****	2.15	2.80	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.030	0.060		*****	196	396			weekly	comp
COPPER	SAMPLE MEASUREMENT	0.0005521	0.00103696	kg/day	*****	4.8	8.5	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp
LEAD	SAMPLE MEASUREMENT	0.0001503	0.0001917	kg/day	*****	<1.30	<1.30	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp
NICKEL	SAMPLE MEASUREMENT	0.0029030	0.0037602	kg/day	*****	24.7	30.2	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.140	0.281		*****	924	1850			weekly	comp
NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE		
Glenn Grieb Project Manager							732 572-4743		05 03 12		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS

(REFERENCE ALL ATTACHMENTS HERE)

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

FACILITY

LOCATION

ATTN:

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT

PERMIT NUMBER

001


DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY
05	02	01

TO

YEAR	MO	DAY
05	02	28

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC	SAMPLE MEASUREMENT	0.0015391	0.0022561	kg/day	*****	13.3	16.8	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.177	0.356		*****	1170	2350			weekly	comp
CYANIDE	SAMPLE MEASUREMENT	<0.0011564	<0.0014746	kg/day	*****	<10.0	<10.0	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.002	0.004		*****	13.2	26.4			weekly	comp
ALUMINUM	SAMPLE MEASUREMENT	<0.0076627	<0.0114132	kg/day	*****	65.3	77.4	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	1.40	2.81		*****	9240	18500			weekly	comp
IRON	SAMPLE MEASUREMENT	0.0048276	0.0064144	kg/day	*****	39.8	43.5	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	60.6	182		*****	532000	1070000			weekly	comp
ACUTE TOXICITY, (LC50)	SAMPLE MEASUREMENT	QUARTELY	REPORT	***	n/a	*****	*****	%	0		
	PERMIT REQUIREMENT	*****	*****		50(3)	*****	*****			see permit	equivalent
Ammonia	SAMPLE MEASUREMENT	*****	*****	***	*****	0.210	0.230	mg/l	0	*****	*****
	PERMIT REQUIREMENT	*****	*****		*****	4.9	10.0			2/month	comp
	SAMPLE MEASUREMENT	*****	*****	***	*****	*****	*****	***	***	*****	*****
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****			*****	*****
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)				 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Glenn Grieb Project Manager								732 572-4743		05 03 12	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR MO DAY	
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)									